

Part B Insider (Multispecialty) Coding Alert

5010 Prep Quiz: Are You And Your Vendor Ready to Use the 5010 Form? Take This Quiz to Be Sure

The June 15 test date is fast approaching.

As we reported in last week's Insider, CMS will be hosting a national 5010 form testing day on June 15, at which point you can submit a sample claim to confirm your 5010 form preparedness. But many practices aren't flying solo when it comes to submitting the new 5010 form--often, practices rely on vendors to confirm that the new forms are ready for submission.

Consider the three questions below to determine whether you're working closely enough with vendors so you won't be behind the eight ball as of next January, when the 5010 form will be required.

Communicate With Vendors to Ensure Readiness

Question 1: My vendor's representative says that they are completely prepared for the 5010 and they have never let us down in the past. Is there anything further we need to do?

Answer: Even if you have a great relationship with your vendor, you can't simply hope that they are ready to process claims using the 5010 form. Keep an ongoing dialogue as new topics regarding 5010 arise. For instance, now that the June 15 testing date has been set, ask your vendor what types of claims they'd like to submit as part of the test. And if you haven't had a thorough 5010 conversation with your vendor, now is definitely the time to start.

"Practices should be talking with their billing software vendors and clearinghouses to ensure they will have the required upgrades and be able to test prior to the January 2012 deadline," advises **Cyndee Weston**, executive director of the American Medical Billing Association in Sulpher, Okla.

You should start communicating with your vendors by pulling all your contracts and evaluating how the each system and vendor will impact implementation in your practice. Check to see if you have anything written in the contract that states government mandates are covered. If so, find out the cost to your practice -- if upgrades are part of your contract, your practice might have saved itself a bundle.

"Practices will have to update software which means working with vendors and there are several facts and levels/steps to go through for that," says **Catherine Brink, CMM, CPC, CMSCS**, owner of HealthCare Resource Management, Inc., in Spring Lake, N.J. Then, contact your vendors and assess their readiness. Ask what their plans are and set up timelines to get your practice's system ready. Start by asking the following questions:

- Will the vendor be ready for version 5010 compliance by Jan. 1, 2012?
- Is the vendor prepared for the move to ICD-10 on Oct. 1, 2013?
- What costs will be involved with the transition?
- What are the vendor's implementation plans?
- Will your practice need new or enhanced software/hardware?

Get involved: Several people in your practice, including the physician, the biller, and the coder, should be involved when practices communicate with information system vendors (for EMR, claims processing, etc.) about their plans for the new code set implementation.

Tip: If your vendor does business internationally it may already accommodate ICD-10. More likely, you'll need find out when your vendor plans to be ready for ICD-10. Find out if the vendor has plans to upgrade systems by the compliance

date. You may find that some vendors do not have plans to upgrade due to the age of their system or technology. In those cases, you should consider selecting a new vendor that will make sure your practice doesn't face technology and system processing issues come Oct. 1, 2013.

Bottom line: If your vendor is unable to offer you solutions at this time you should begin looking for a new vendor. "Testing claims to ensure that they will process correctly is key," says **Kim Dues, CPC**, owner of Mass Medical Billing Services in Dickinson, Tex. "If your system is not prepared, you may have to consider looking for another system that is."

Focus on Hardware Requirements, Especially for ICD-10

Question 2: Our vendor said that because 5010 and ICD-10 will go hand-in-hand, I need to evaluate our computer's capability for dealing with the expanded code set that ICD-10 will provide. How can I determine whether our computer is sophisticated enough to handle the transition?

Answer: Hardware is the basis of the technological infrastructure you must have in place for the version 5010 and ICD-10 implementations. You'll want to evaluate the current age of your practice's hardware, the dual processing capability for ICD-9 and ICD-10 codes, storage capacity, processing power, and transmission capability. You'll need to ensure your system is able to handle each of the following:

- Alphanumeric codes
- 7 character codes Longer code descriptions
- New edits based on age, sex, and more
- Separate data entry programs for dual processing ICD-9 and ICD-10.

Your system will need to be able to process both the old ICD-9 code set and new ICD-10 code set simultaneously to allow for claims processing, reporting, and analysis until all healthcare entities and services are to ICD-10. The period of time needed for maintaining both ICD-9 and ICD-10 will depend on the needs of your individual practice.

Maintain Enough Storage for Records

Question 3: Our vendor oversees our medical records storage systems--should they be able to show us that they've got the technology to store all the information that the 5010 form will require?

Answer: You definitely need to ensure your practice or vendor has a system and hardware that can handle the increased file and database storage you'll need with ICD-10 -- this is an especially important consideration for hospitals, payers, and clearinghouses. Plus, you'll need additional storage space to accommodate the ICD-9 code information that you'll need to maintain for an undetermined interim period of dual processing.

In addition to the dual processing demand, ICD-10 will increase the number of claims, records, and overall data storage requirements. You need to ensure your practice and vendor have adequate processing and storage capacity for both live operations and testing.

Check that your hardware and software can support the following:

- Historical file storage
- New file storage
- Backup file storage.

Don't miss: Make sure you don't overlook other systems that might involve diagnosis triggers as well, such as your patient scheduling system.

Consider also the fact that you'll want your system -- and your staff -- to be able to resubmit an increased number of denied claims due to errors on both the payer and provider side that are bound to occur during this transition.